# Session 3 Panel Discussion

#### • Questions:

- What developments are needed to make epidemiologic cohorts a cornerstone of the discovery to practice continuum?

- How should NCI and NIH facilitate multidisciplinary collaboration to integrate these developments into the research portfolio?

• Moderator: Julie Buring, Sc.D., M.S.

#### • Panelists:

- Julie R. Palmer, Sc.D., M.P.H. Boston University School of Public Health
- Lyle Palmer, Ph.D. Ontario Institute for Cancer Research
- Leslie L. Robison, Ph.D. (unable to attend) St. Jude Cancer Center
- Daniela Seminara, Ph.D., M.P.H. (presentation not available) National Cancer Institute

Julie R. Palmer, Sc.D., M.P.H. Boston University School of Public Health

## Optimizing the Value of 21st Century Cohorts

### Improvements in existing cohorts

- Online questionnaires
- Repeated measures
- Data from Census, EPA, etc.

- Tx, recurrence, 2<sup>nd</sup> cancers
- Tumor tissue, TMAs

## NIH infrastructure support for collaborative research Consortia of multiple cohorts

- Centralize harmonization of cohort exposure data
- Facilitate access to CA registries, death files, Medicare claims data
  Collaborations of individual cohorts with outside investigators
- Benefits: fresh ideas, maximization of valuable resource
- Mechanisms: logistics, funding

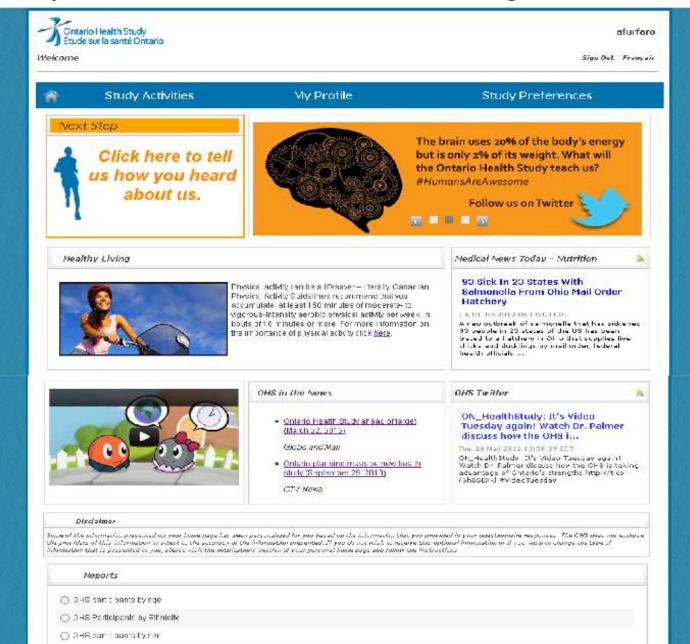
Lyle Palmer, Ph.D. Ontario Institute for Cancer Research

## Key features of new cohorts in the digital age...

- Online
- Responsive, constant evaluation
- Longitudinal over entire life course
- Large in scale
- Inclusive: Representative and diverse samples
- Comprehensive platforms for disease and health research.
- Closely integrated with linked administrative health data
- Closely integrated with government, clinical and public health networks
- Engines for <u>translation</u>



#### A personalized home page for every participant A platform for bi-directional data interchange



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